

SERIAL NUMBER 09/016,739	FILING DATE 01/30/98	CLASS 414	GROUP ART UNIT 3617	ATTORNEY DOCKET NO. 1002-0537
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APPLICANT  
D. MICHAEL GODWIN, CARY, NC; RONALD MARK GINN, CARY, NC; ALLEN F. BOYER, CARY, NC.

\*\*CONTINUING DOMESTIC DATA\*\*\*\*\*  
VERIFIED

none when 2/16/99

\*\*371 (NAT'L STAGE) DATA\*\*\*\*\*  
VERIFIED

none when 2/16/99

\*\*FOREIGN APPLICATIONS\*\*\*\*\*  
VERIFIED

none when 2/16/99

FOREIGN FILING LICENSE GRANTED 04/15/98

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY NC	SHEETS DRAWING 24	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 3
Verified and Acknowledged <u>when</u> <u>2/16/99</u> Examiner's Initials _____ Initials _____					

ADDRESS  
PAUL J MAGINOT  
MAGINOT AND ADDISON  
BANK ONE CENTER TOWER  
111 MONUMENT CIRCLE SUITE 3000  
INDIANAPOLIS IN 46204-5130  
*Bradford G. Addison  
Maginot, Addison + Moore*

TITLE  
METHOD OF VERIFYING COUPLING OF AN IMPLEMENT TO A WORK MACHINE

FILING FEE RECEIVED \$790	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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## UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS  
UNITED STATES PATENT AND TRADEMARK OFFICE  
WASHINGTON, D.C. 20231  
www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 7368

<b>SERIAL NUMBER</b> 09/016,739	<b>FILING DATE</b> 01/30/1998 <b>RULE</b>	<b>CLASS</b> 414	<b>GROUP ART UNIT</b> 3652	<b>ATTORNEY DOCKET NO.</b> 1002-0537
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**APPLICANTS**

D. MICHAEL GODWIN, CARY, NC;  
RONALD MARK GINN, CARY, NC;  
ALLEN F. BOYER, CARY, NC;

\*\* CONTINUING DATA \*\*\*\*\*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE  
GRANTED \*\* 04/15/1998

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	<b>STATE OR COUNTRY</b> NC	<b>SHEETS DRAWING</b> 24	<b>TOTAL CLAIMS</b> 20	<b>INDEPENDENT CLAIMS</b> 3
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials		

**ADDRESS**

BRADFORD G. ADDISON  
MAGINOT, ADDISON & MOORE  
BANK ONE CENTER TOWER  
111 MONUMENT CIRCLE SUITE 3000  
INDIANAPOLIS , IN 462045130

**TITLE**

METHOD OF VERIFYING COUPLING OF AN IMPLEMENT TO A WORK MACHINE

<b>FILING FEE RECEIVED</b> 1022	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees ( Filing )
		<input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )
		<input type="checkbox"/> 1.18 Fees ( Issue )
		<input type="checkbox"/> Other _____
		<input type="checkbox"/> Credit



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Washington, DC 20231  
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Bib Data Sheet

CONFIRMATION NO. 7368

<b>SERIAL NUMBER</b> 09/016,739	<b>FILING DATE</b> 01/30/1998 <b>RULE</b>	<b>CLASS</b> XXX	<b>GROUP ART UNIT</b> 3652	<b>ATTORNEY DOCKET NO.</b> 1002-0537
<b>APPLICANTS</b> D. MICHAEL GODWIN, CARY, NC; RONALD MARK GINN, CARY, NC; ALLEN F. BOYER, CARY, NC;				
** CONTINUING DATA *****				
** FOREIGN APPLICATIONS *****				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> ** 04/15/1998				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged Examiner's Signature _____ Initials _____	<b>STATE OR COUNTRY</b> NC	<b>SHEETS DRAWING</b> 24	<b>TOTAL CLAIMS</b> 20	<b>INDEPENDENT CLAIMS</b> 3
<b>ADDRESS</b> 719				
<b>TITLE</b> METHOD OF VERIFYING COUPLING OF AN IMPLEMENT TO A WORK MACHINE				
<b>FILING FEE RECEIVED</b> 1022	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	